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*Southern District of New York  
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April 17, 2020

### **BY ECF AND EMAIL**

Honorable Kenneth M. Karas  
United States District Judge  
Southern District of New York  
300 Quarropas Street  
White Plains, NY 10601

**Re: United States v. Steven Jones,  
19 Cr. 128 (KMK)**

Dear Judge Karas:

I write to inform the Court that my client, Steven Jones, has tested positive for COVID-19 at the Westchester County Jail and to ask this Court to order that he be taken to the hospital.

According to medical records also in the possession of the U.S. Attorney's Office, Mr. Jones developed a fever and body aches on April 10. He was given Tylenol, and nasal swabs were collected for testing. The positive result came back on April 14. Mr. Jones has been placed in isolation but has received no medical care beyond Tylenol and daily temperature checks.

I spoke with Mr. Jones today, and I learned that his symptoms have become worse. He still has a fever (it had gone down but is now above 101, his highest fever yet) and body aches despite the Tylenol. He also has a dry cough, chest pain, loss of appetite, and labored breathing. He has asked to be taken to the hospital, but he has been told that his condition is not yet bad enough to require hospitalization.<sup>1</sup>

Your Honor is of course aware that the coronavirus is a dangerous disease that has already killed over 31,000 Americans, including nearly 13,000 in New York. Your Honor may not be aware, however, of Mr. Jones' individual vulnerability to the disease. He was born with a congenital heart valve issue and he is obese, with a body mass index of approximately 36. Obesity is emerging as one of the most serious risk factors for severe disease. *See, e.g.,* Roni Caryn Rabin,

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<sup>1</sup> I understand from AUSA Coffman that the jail confirms Mr. Jones' 101-degree fever but disputes his other symptoms.

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*Obesity Linked to Severe Coronavirus Disease, Especially for Younger Patients*, The New York Times (Apr. 16, 2020), available at <https://nyti.ms/2xvhE9Q>; Petrilli et al., *Factors Associated with Hospitalization and Critical Illness Among 4,103 Patients with COVID-19 disease in New York City*, at 14 (Apr. 11, 2020) (“[T]he chronic condition with the strongest association with critical illness was obesity, with a substantially higher odds ratio than any cardiovascular or pulmonary disease.”), <https://bit.ly/2XzRTj1>; Cai et al., *Obesity and COVID-19 Severity in a Designated Hospital in Shenzhen, China* (Apr. 1, 2020) (“[O]besity, especially in men, significantly increases the risk of developing severe pneumonia in COVID-19 patients.”), <https://bit.ly/2VapChG>.

Chest pain – which Mr. Jones is now experiencing – is a “emergency warning sign[]” that requires immediate medical attention. CDC, *What to Do if You Are Sick*, <https://bit.ly/2XK6ics>. It is also significant that Mr. Jones is in day 7 of his illness. The end of the first week is a watershed: “Day 7: It is on this day that people who have been experiencing persistent chest pain or pressure, shortness of breath and bluish lips or face are admitted to the hospital. People who are suffering less severe symptoms will likely see those symptoms begin to get better.” Debbie Lord, *Coronavirus: How COVID-19 progresses; a day-by-day breakdown of symptoms*, KIRO 7 News (Apr. 8, 2020), <https://bit.ly/2wQu9wg>. The CDC advised that “[c]linicians should be aware of the potential for some patients to rapidly deteriorate one week after illness onset.” CDC, *Interim Clinical Guidance for Management of Patient with Confirmed Coronavirus Disease (COVID-19)* (Apr. 3, 2020), <https://bit.ly/2VFb0FJ>. “Patients with risk factors for severe illness . . . should be monitored closely given the possible risk of progression to severe illness in the second week after symptom onset.” *Id.*

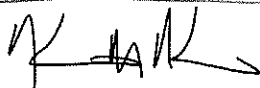
For all these reasons, I ask the Court to order that Mr. Jones be taken to the hospital for treatment and monitoring.

There is a conference in this matter scheduled for April 21 at 11:30 a.m. I had planned to request an adjournment (and exclusion of time) in light of the pandemic and its disruption of my work on this case. Given these developments, however, it may be necessary to use the conference to discuss Mr. Jones’ healthcare.

Respectfully submitted,

/s/  
Clay H. Kaminsky  
Assistant Federal Defender  
(212) 417-8749

cc: AUSA Jeffrey Coffman



4/17/20

After conducting a telephone hearing within an hour of receiving this application, and after hearing from the Government, the Court grants the application and directs the appropriate officials to have Mr. Jones taken to the nearest hospital for further evaluation and treatment. The main reason for this is that Mr. Kaminsky has heard Mr. Jones coughing and there is no dispute that he has had a fever for several days.

So Ordered.